



Rhode Island Department of Health
Three Capitol Hill
Providence, RI 02908-5094

www.health.ri.gov

Interim Health Advisory - Clarification

Date: May 13, 2009
To: Rhode Islanders
From: Director of Health, David R. Gifford, MD, MPH
Re: Hemodialysis Patients & H1N1 Virus

Guidance for Infection Control for Care of Patients with Confirmed, Probable, or Suspected Novel Influenza A (H1N1) Virus Infection in Outpatient Hemodialysis Settings

This information is provided to clarify novel influenza A (H1N1) virus infection control recommendations that are specific to outpatient hemodialysis centers. This information complements, but does not replace the general infection control recommendations for novel influenza A (H1N1).

- Hemodialysis patients meeting criteria for isolation precautions for novel H1N1 influenza (confirmed, probable, or suspected novel H1N1 infection – see [guidance on case definition](#)) may be dialyzed in outpatient dialysis centers if they would not normally be referred to a higher level of care based on their symptomatology. Patients should be triaged at, or prior to, arrival at the facility and symptomatic patients with febrile respiratory illness (defined as fever [greater than 37.8° Celsius] plus one or more of the following: rhinorrhea or nasal congestion; sore throat; cough) should be segregated from other patients as soon as possible.
- If a separate room is not available, the patient should wear a surgical mask and should be treated at a corner or end-of-row station, away from the main flow of traffic if available. The patient should be separated by at least 6 feet from the nearest patient stations (in all directions). If a facility has more than one patient meeting criteria for novel H1N1 influenza isolation precautions, consideration should be given to cohorting these patients and the staff caring for them together in the unit and/or on the same shift.
- Droplet, contact, and standard precautions should be used by healthcare personnel when having prolonged face to face contact with patients meeting criteria for novel H1N1 influenza isolation precautions. This includes the use of a surgical mask (or a N95 respirator, if available) non-sterile gloves and gown, and if preferred or available, eye protection (goggles or face shield) for the health care personnel can be considered. Surgical masks, respirators, gowns and gloves should be removed and discarded and hand hygiene, with soap and water or alcohol based hand sanitizer, performed prior to leaving the dialysis station.
- As with all hemodialysis patients, all supplies taken to the station should be reserved for that patient alone and either discarded after use or cleaned and disinfected prior to use by another patient (information available at the MMWR report: [Recommendations for Preventing Transmission of Infections Among Chronic Hemodialysis Patients](#))
- Equipment, such as chair-side computers used for medical charting, should be utilized for that patient alone during the treatment of that patient and appropriately cleaned and disinfected before use with another patient.

- Environmental surfaces should also be cleaned and disinfected in accordance with standard facility protocols after the patient has vacated the station and before setting up the machine and arrival of a new patient into that station
- Precautions should be kept in place for 7 days after the onset of the patient's symptoms or at least 24 hours after symptoms have resolved; whichever is longer.